Department of Defense

Oral Health and Readiness Classification System Diagnostic Calibration Exercise

Based in part on the Navy "Dental Image Quiz" version 1.0

and 20

Click below to advance

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- **The Purpose:** to insure both military and non-military Dentists understand the correct use of the Department of Defense Oral Health and Readiness Classification System.
- The Goal: is that Dentists who complete this program, will gain confidence in their ability to correctly and consistently classify a patient within the system.





- The Method: The exercise makes use of a self test including clinical slides, radiographs and patient histories. The entire program should take well less than 1 hour to complete, even for those dentists with no experience with the system.
- If your ready, lets begin with some history....





Some History of the Classification System

- A standardize measure of oral health status is vital to military force health protection.
- The negative impact of emergent dental conditions have long been recognized within the military.
 - △ Emergent dental conditions not only result in lost duty time for soldiers, sailors, airmen and marines, but can even impact on military operations.





Some History of the Classification System

- The Department of Defense (DoD) long ago adopted a simple system that allows rapid categorization of service members into 1 of 4 Readiness Categories based upon their oral health conditions.
- The system provides a means to track the Oral Health status of the military, and thus allows for the targeting of resources to those identified with the most immediate needs.





- To maintain uniformity throughout the DoD, Health Affairs Policy: 02-011 documents the nomenclature and specifics of this system. It also includes specific guidance for patient inclusion in a particular category.
- If you are completely unfamiliar with the system, you should click HERE to review the entire 3 page policy document. (*.pdf file requires Acrobat Reader software, to download the free reader, click here)





- Quick Summary of Readiness Classification designations:
 - △ Class 1 = Oral Health
 - >This is a service member with a current dental examination and,
 - The service member has **NO** requirement for **any** treatment or reevaluation
 - e.g. a patient that has received all their treatment planned care and will not be seen again until their next routine examination.





- Quick Summary of Readiness Classification designations:
 - Δ Class 2 = Non-Urgent conditions
 - >This is a service member with a current dental examination and,
 - >The service member <u>does require</u> non-urgent treatment or reevaluation, <u>BUT</u> conditions are <u>unlikely</u> to become <u>Emergent</u> within <u>12</u> months
 - e.g. only need oral prophy, minor caries or defective fillings, 3rd molars with neg signs and symptoms of pathosis recommended for prophylatic removal, etc.





- Quick Summary of Readiness Classification designations:
 - △ Class 3 = Urgent or Emergent conditions
 - >This is a service member with a current dental examination and,
 - >The service member <u>requires immediate</u> treatment for conditions such as severe pain, trauma, or active infection.
 - >Or the service member <u>requires</u> treatment for an asymptomatic condition that <u>will likely</u> be <u>Emergent</u> within <u>12 months</u>
 - e.g. deep caries near pulp, a tooth with a draining fistula, tooth with incomplete root canal therapy, etc.





- Quick Summary of Readiness
 Classification designations:
 △ Class 4 = Require Exam, unknown status
 - >Service member <u>lacks a current</u> <u>examination</u>.
 - >In order to determine Readiness Class, the dentist should use all diagnostic tools at their disposal. This would include necessary routine radiographs, periodontal screening, and thorough soft/hard tissue clinical examination.





- Readiness Classification designations are made at the patient level.
 - △ The service member is assigned the readiness class based upon the "worst" Oral condition with which they present.
 - △ Even if the service member has multiple Class 2 conditions, they are still recorded as Class 2.
 - △ Presence of any Class 3 condition will place the service member in Class 3 category.





- When determining the Readiness Class for a service member the following three Question algorithm is recommended:
 - △ Question (1): "Does the Service Member have a current annual examination which is fully documented in the record?" If the answer is NO, then the patient is Readiness Class 4. You need to complete a full examination with all necessary diagnostic materials to proceed.





- Continuation of Readiness Class algorithm:
 - △ Question (2): "I have completed a full examination, does the patient have **any** conditions or findings that require **any** treatment or reevaluation?" If the answer is NO, then the Patient is Readiness Class 1. If the answer is YES, then go to the next question.





- Continuation of Readiness Class algorithm:
 - △ Question (3): "The patient has conditions that require treatment and/or reevaluation; is/are the condition(s) symptomatic or so severe that they are likely to result in an emergent condition within 12 months?" If the answer is NO, then the Patient is Readiness Class 2. If the answer is YES, then the patient is Readiness Class 3.





The remaining slides will present clinical photos, radiographs, and related histories. You will be asked to classify the service member into one of the 4 Dental Readiness Classification categories based upon the condition of an individual tooth. For the purpose of this exercise, classify the patient based ONLY on the findings of the one tooth presented. Assume that if the tooth requires no treatment

or reevaluation, the patient is Class 1.





Tooth # 13: No history of symptoms. No clinical findings. Note extent of caries on radiograph.

Question: What would be the Dental Readiness Class for

this patient Click Dental based <u>only</u> on the findings of # 13 Readiness ⇒ Class button at right

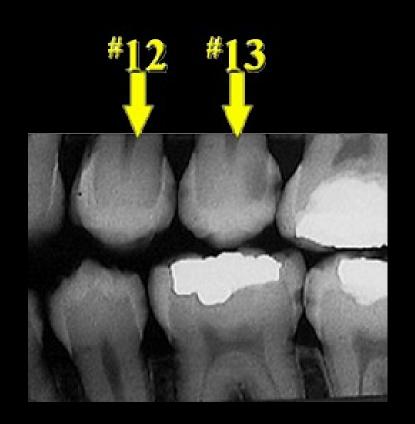








Answer: Based on findings of # 13, patient is <u>CLASS 3</u>. Even though the patient is symptom free, a cavitated lesion that extends greater than 1/2 way from DEJ to pulp has high likelihood of becoming Emergent within 12 months.



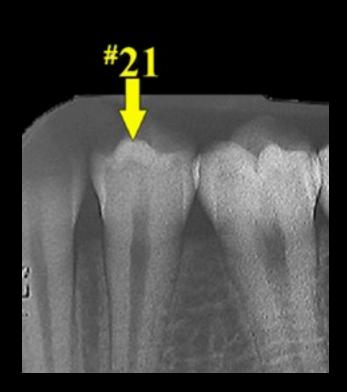




Tooth # 21: No history of symptoms. No clinical findings. No findings on radiograph.

Question: What would be the Dental Readiness Class for this patient

this patient based *only* on the findings of # 21







Answer: Based on findings of # 21, patient is **CLASS 1**. Tooth has NO pending requirements for treatment or reevaluation. Routine evaluation at next examination is only requirement.









Tooth # 14: No symptoms since RCT completed 5 years ago. Intact margins on restoration.

Question: What would be the Dental Readiness Class for this patient based *only* on the findings of # 14 1 2 3 4







Answer: Based on findings of # 14, patient is <u>CLASS 2</u>. Tooth requires follow up, but has low likelihood of becoming Emergent within 12 months. Future treatment may include cuspal coverage amalgam or a crown.









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- Again, as a review:
 - \triangle Class 1 = Oral Health
 - >No required treatment or reevaluation
 - \triangle Class 2 = Non-Urgent or minor conditions
 - >Unlikely to become Emergent within 12 months
 - △ Class 3 = Urgent or Emergent conditions
 - >Immediate need or will likely be Emergent within 12 months
 - Δ Class 4 = Require Exam, unknown status





Tooth # 17: Patient is 19 years old, gives no history of symptoms. Periodontal probing reveals no oral communication with # 17.

Question: What would be the this patient

based Js of # 17?



Class for



Answer: Based on findings of # 17, patient is <u>CLASS 1</u>. Tooth is without historical, clinical or radiographic signs or symptoms, and is NOT planned for prophylactic removal at this time.









Tooth # 19: No symptoms since RCT completed 1 week ago. IRM fill.

Question: What would be the Dental Readiness Class for this patient

based <u>only</u> on the findings of 1 2 3 4







Answer: Based on findings of # 19, patient is <u>CLASS 3</u>. Highly likely the IRM restoration would fail within a 12 month period. At a minimum, permanent restorative material should be placed in access opening to move the patient to Class 2 category.







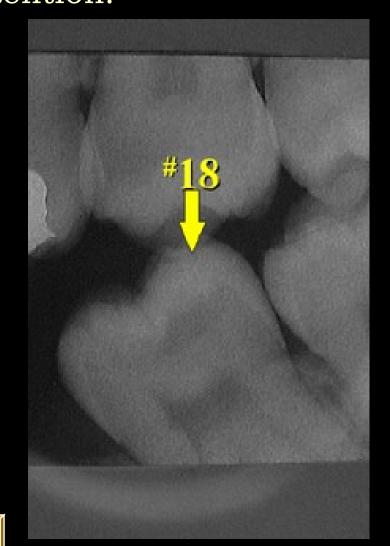


Tooth # 18: History of occasional pain and sensitivity. Clinical evidence of occulsal cavitation. Radiographic evidence of caries well into dentin.

Question: What would be the Dental Readiness Class for



Answer: Based on findings of # 18, patient is <u>CLASS 3</u>. A cavitated lesion that extends 1/2 way from DEJ to pulp and is already causing symptoms requires urgent attention.

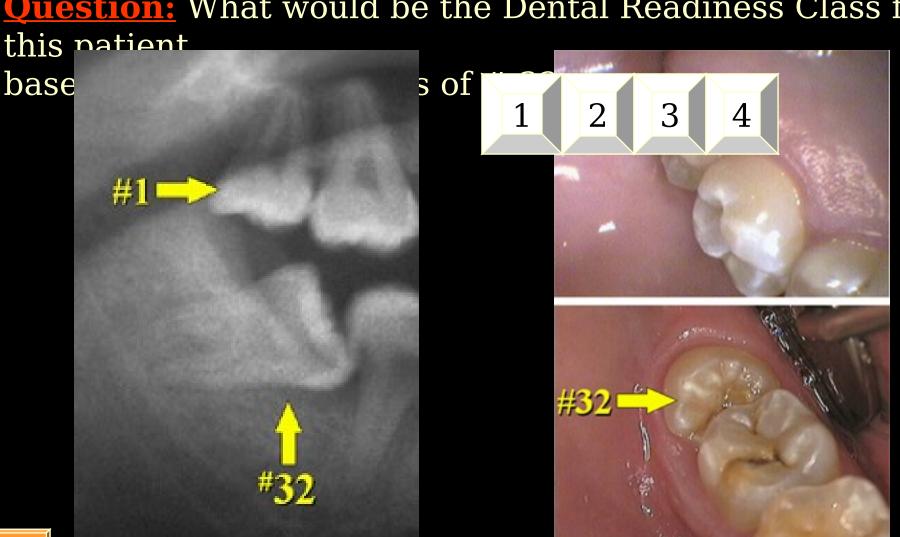




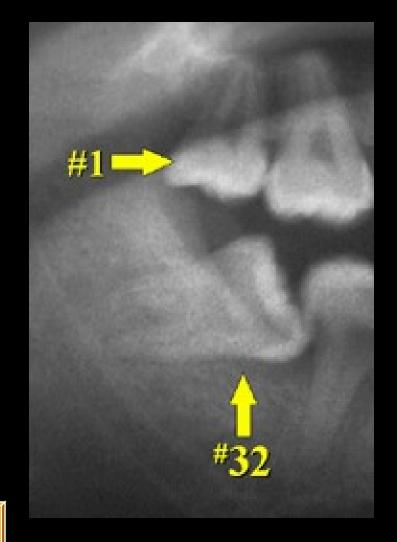


Tooth # 32: Past Hx of severe pain and swelling, however, currently no symptoms and patient states, "No problem with it for last few weeks."

Question: What would be the Dental Readiness Class for



Answer: Based on findings of # 32, patient is **CLASS 3**. A partially erupted and/or malposed tooth that requires extraction and has historical, clinical or radiographic signs or symptoms of pathosis is Class 3.









Tooth # 29: No history of symptoms. Enamel "stick" found on occulsal surface, no radiographic findings noted.

Question: What would be the Description of this patient based *only* on the findings of # 25:





Answer: Based on findings of # 29, patient is CLASS 2. Tooth requires follow up, but very low likelihood of becoming Emergent within 12 months. Future treatment may include sealant or preventive resin restoration.









Tooth # 14: No symptoms. SSC was placed over 4 years ago. Mild to moderate local gingivitis surrounding SSC. **Question:** What would be the Dental Readiness Class for

this patient

based *only* on the findings of #





Answer: Based on findings of # 14, patient is **CLASS 2**. While tooth will require follow up treatment, interim SSC restoration is NOT likely to result in Emergency visit within a 12 month period.



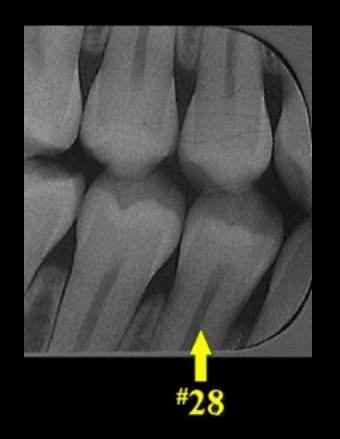






Tooth # 28: Current symptoms include prolonged sensitivity to cold temperatures and sweets. Patient states, "I can't drink Coke anymore."

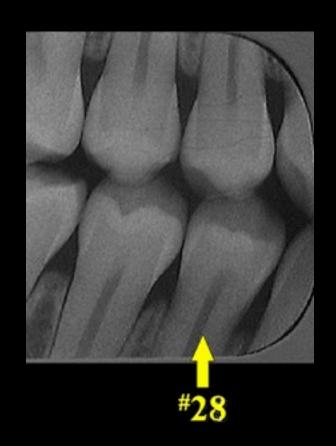
Question: What would be the Dental Readiness Class for this patient based *only* on the findings of # 1 2 3 4







Answer: Based on findings of # 28, patient is **CLASS 3**. Tooth requires immediate treatment due to symptoms and extent of cavitated lesion at CEJ.





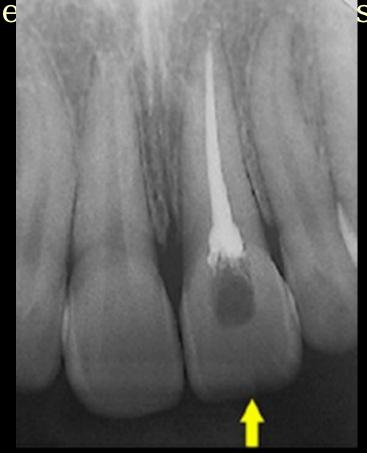




Tooth # 9: No symptoms since RCT completed over 3 years ago. Patient states he dislikes the color of tooth. Access has intact composite fill.

Question: What would be the Destriction of this patient 1 2 3 4









Answer: Based on findings of # 9, patient is <u>CLASS 2</u>. Tooth requires follow up, but very low likelihood of becoming Emergent within 12 months. Treatment may include non-vital bleaching or perhaps P&C with full coverage.









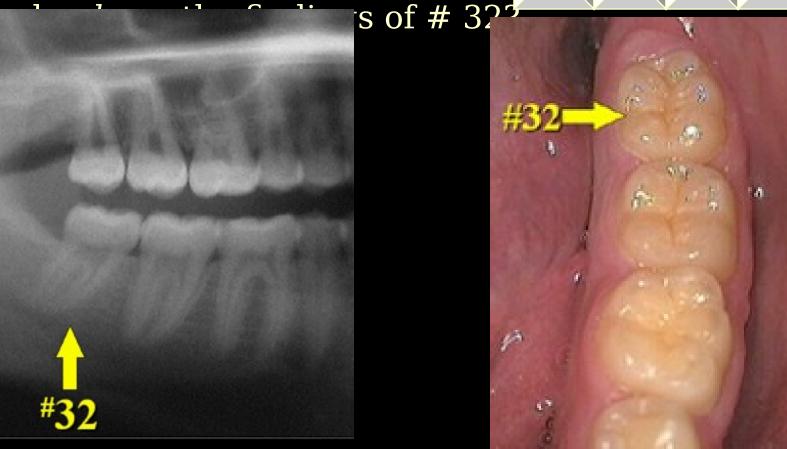
Tooth # 32: Past Hx 26 year old states: "Hurt off and on when I was in school, my dentist told me back then I needed them out, but I have no problems now..." No clinical or radiographic findings.

s for

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Question: What would be the Denthis patient

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Answer: Based on findings of # 32, patient is <u>CLASS 1</u>. Even though tooth has history of past symptoms, its current clinical presentation is such that routine reevaluation at time of examination is all that is required.







Tooth # 3: No symptoms since RCT completed many years ago. **Question:** What would be the Dental

Readiness Class for this patient based *only* on the findings of #





Answer: Based on findings of # 3, patient is **CLASS 3**. Tooth is at high risk of becoming an Emergent need for the service member within 12 months.









Generally, most providers have no problem

quickly identifying obvious Class 3









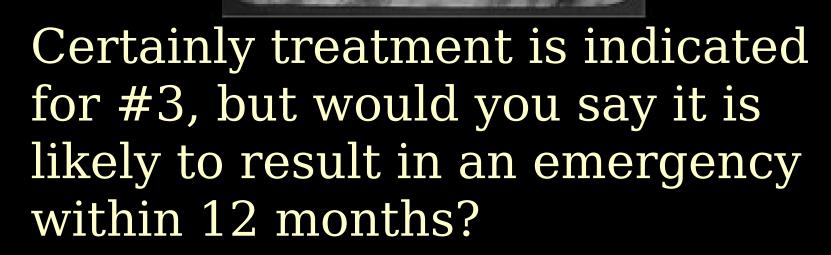








More difficult for most providers (particularly those new to the system), is the distinction between Class 3 and 2 Carious lesions. Note the distal of tooth #3.





A key point to remember is this:

Identifying someone as Class 2 still indicates that future treatment *is* necessary. It does NOT indicate that care should in any way be intentionally delayed. It only indicates that the individual has conditions that are not likely to result in an emergency within 12 months.





You as a provider are **NOT** lessening the importance of obtaining necessary follow up and treatment by designating the distal lesion on #3 as Class 2.

Providers should not equate the Class 2 designation to Class 1 Oral Tealth.





Thank You for participating

- If you still have questions, it is recommended you first review the Health Affairs policy by clicking HERE.
- In addition, you may contact the POC at DASG-DC at 703-681-3031.
- This is a product from the Dental Staff, Army Office of The Surgeon General. A Special Thanks goes to the Naval Institute for Dental and Biomedical Research; NDC Great Lakes, IL; and the University of Health Sciences, San Antonio, Tx.

